

Amendments T the Claims

Claims 1-34 (Previously Cancelled).

Claim 35 (Currently Amended): A method for providing point of service medical billing using a computer comprising:
receiving a selection of a patient procedure code from a care provider on a first computer at a point of service;
receiving a selection of a diagnosis code from a care provider on the first computer at the point of service that supports the selection of the patient procedure code;
electronically sending patient data including the patient procedure code and the diagnosis code from the first computer to a second computer; and
generating a patient bill at the second computer, the patient bill associated with the patient data.

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Claim 36. (Currently Amended): A method of providing point of service medical billing comprising:
electronically sending patient data from a back-end computer to a point of service computer;
associating at least one patient procedure code with the patient data on the point of service computer;
associating at least one diagnosis code with the patient data on the point of service computer the at least one diagnosis code supporting one of the at least one procedure code;
electronically sending patient data including the patient procedure code and the diagnosis code from the point of service computer to the back-end computer; and
generating a patient bill at the back-end computer, the patient bill corresponding to the patient data.

Claims 37-67 (Previously Cancelled).

Claim 68 (Previously Added): The method of claim 35 further comprising presenting the patient bill to a patient prior to departure of the patient.

Claim 69 (Previously Added): The method of claim 68 further comprising verifying accuracy of patient data by the care provider prior to electronically sending the patient data from the first computer to the second computer.

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Claim 70 (Previously Added): The method of claim 35 wherein the first computer communicates wirelessly with the second computer.

Claim 71 (Previously Added): The method of claim 35 wherein the patient procedure code is selected by the care provider from a list of selectable patient procedure codes.

Claim 72 (Previously Added): The method of claim 35 wherein the diagnosis code is selected by the care provider from a list of selectable diagnosis codes.

Claim 73 (Previously Added): The method of claim 35 further comprising electronically sending patient data from the second computer to the first computer prior to a medical examination of a patient associated with the patient data.

Claim 74 (Previously Added): The method of claim 35 further comprising receiving ailment information from the care provider on the first computer at the point of service.

Claim 75 (Previously Added): The method of claim 35 further comprising receiving referring provider information from the care provider on the first computer at the point of service.

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Claim 76 (Previously Added): The method of claim 35 further comprising receiving patient notes from the care provider on the first computer at the point of service.

Claim 77 (Previously Added): The method of claim 35 further comprising receiving a modifier code from the care provider on the first computer at the point of service.

Claim 78 (Currently Amended): A software article stored on a storage medium associated with a point of care computer, comprising:
a user interface adapted for prompting for and receiving a selection of a patient procedure code from a care provider, subsequently prompting for and receiving a selection of a diagnosis code from the care provider associated with the selection of the patient procedure code, and prompting for verification by the care provider of the accuracy of patient data prior to generating a patient bill at the second computer;
means for electronically sending patient data including the patient procedure code and the diagnosis code from the point of care computer to the second computer.

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Claim 79 (Previously Added): The software article of claim 78 wherein the user interface includes a list of selectable patient procedure codes.

Claim 80 (Previously Added): The software article of claim 78 wherein the user interface includes a list of selectable diagnosis codes.

Claim 81 (Previously Added): The software article of claim 78 wherein the user interface is further adapted for prompting for and receiving ailment information from the care provider.

Claim 82 (Previously Added): The software article of claim 78 wherein the user interface is further adapted for prompting for and receiving referring provider information from the care provider.

Claim 83 (Previously Added): The software article of claim 78 wherein the user interface is further adapted for prompting for and receiving patient notes from the care provider.